	FATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004														Application or Docket Number				
		CLAIMS AS FILED - PART I SMALL ENTI													<u> </u>		THER T	<i>Q</i>	
		IIS NATI		N 07405 a			(Column 1)			(Column 2)			E	<u> </u>	0	R SM	MALL EN	HAN YTITY	
	ı		TIONAL STAGE FEES					1_				R	MTE FE		E ·	RA	TE	FEE	
	ŀ	BASIC FEE					LL ENT. = \$ 150		LARGE ENT = \$ 300			BASIC	156)] or	R BASIC F	EΕ			
	EXAMINATION FEE					(4)	PCT Article 33(1) = \$50/\$100	1	## All other situations = \$ 100 / \$ 200			EXAM,	711	1	EXAM, F	EE			
	SEARCH FEE					ALL OF	SA = \$50/\$100 ther countries = 200/\$400	^4	All other situations = \$ 250 / \$ 500			SEARCI	HFEE 2			SEARCH	FEE		
	FEE FOR EXTRA SPEC. PGS.						minus 100 =			/50 =			25 = '	1 · · · ·	1	X \$ 25	0 =		
	TOTAL CHARGEABLE CLAIMS					21	2 Uminus 20 = . 4					X \$ 2	5 = /	Á()	OR	X \$ 50	, 		
	INI	IDEPENDENT CLAIMS				2	minus 3 = .			×			0 =	00	OR	X \$ 200			
	MU	ILTIPLE DE	PEN	DENT CLAIN	1 PRE	ESENT	SENT						0 = 1./	R()	OR	+ \$ 360		\dashv	
-	• 1	f the differ	ence	e in column	1 is le	ess than a	zero, enter "0"	in co	lumn 2			TOTA		初	OR L	TOTAL			
	CLAIMS AS AMENDED - PART II OTHER															R THAN	,		
F	_	I	_	(Column 1)		(Column 2) (Column 3)					SMALL ENTITY OR SMALL ENTIT							
	¥ N:			REMAINING AFTER AMENDMENT			NUMBEI PREVIOUS PAID FOI	R SLY	PRESENT EXTRA			RATE	DI- IAL E		RATE	ADI TION FEI	IAL		
AMENDAGE		Total	1		M	linus		1-	-		Γ	X \$ 25 =	1	$\neg \mid_{\circ}$	R :	X \$ 50 =	1-	\neg	
AME		ndependen	dent • Min			inus	***		=			(\$ 100 =	1.	70	R X	\$ 200 =	1	_	
	\perp	FIRST PRE	SEI	TATION OF	MUL.	TIPLE OEF	PLE DEPENDENT CLAIM			7	+\$ 180 =			O	1 +	\$ 360 =	†	7	
										_	10	TAL ADDIT		ÖF	, TOI	AL ADOIT.			
				(Column 1)			(Column 2)	,	Column 3)				:					7	
ENDMENT B				CLAIMS REMAINING AFTER MENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	T	PRESENT EXTRA			RATE	ADÓI- TIONAL FEE	7	F	ATE	ADDI- TIONAL FEE		
	То	lal	ŀ		Minu	ıs	••	T=			X	\$ 25 =		OR	X	50 =		180	
	Independent •				Minu	s	***	=			X\$	100 =		OR	X \$ 200 =			Best.	
	F	RST PRES	ENT	ATION OF M	JLTIF	PLE DEPE	E DEPENDENT CLAIM			1 +1		180 =		OR	+\$:	360 =		P	
	TOTAL ADDIT.													OR		ADDIT.		12	
- 1	If the entry in column 1 is less than the entry in column 2, write "of in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20', enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than "I", enter "J". The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box is column 1.														vailable Co				
PT	0-47	6 (Rev. 02/20	05)		,					-	,	wierd and Tox	demark Office	- U.S. O	EPARTI	ENT OF CO	MMERCE	ğ	

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